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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number
091955548

APPLICATION AS FILED – PART I

FOR BASIC FEE (37 CFR 1.16(a), (b), or (c))	NUMBER FILED	NUMBER EXTRA
SEARCH FEE (37 CFR 1.16(k), (l), or (m))		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		
TOTAL CLAIMS (37 CFR 1.16(l))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(i))		

* If the difference in column 1 is less than zero, enter "0" in column 2.

TOTAL

TOTAL

APPLICATION AS AMENDED – PART II

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(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(j))	Minus 	=
	Independent (37 CFR 1.16(h))	Minus 	=
	Application Size Fee (37 CFR 1.16(s))		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

SINGLE ENTRY	
RATE (\$)	ADDITIONAL FEE (\$)
X	=
X	=
TOTAL ADD'L FEE	



**TOTAL
ADD'L FEE**

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(j))	Minus	**
	Independent (37 CFR 1.16(h))	Minus	***
	Application Size Fee (37 CFR 1.16(s))		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))			

RATE (\$)	ADDITIONAL FEE (\$)
X =	
X =	
TOTAL ADD'L FEE	

RATE (\$)	ADDITIONAL FEE (\$)
X	=
X	=
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

**** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".**

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number

collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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PATENT APPLICATION FEE DETERMINATION RECORD

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Application or Docket Number

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TOTAL

TOTAL

APPLICATION AS AMENDED – PART II

	(Column 1)	(Column 2)	(Column 3)	AMENDMENT A
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY
Total (37 CFR 1.16(j))	* 2	Minus	** 20 =	RATE (\$)
Independent (37 CFR 1.16(h))	* 1	Minus	*** 3 =	ADDITIONAL FEE (\$)
Application Size Fee (37 CFR 1.16(s))				X =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))				X =
				TOTAL ADD'L FEE
				OR TOTAL ADD'L FEE

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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 2
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 3

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

09955548

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	14	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	14 minus 20 =	0
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

9-7-04 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	-- 20 --	- 0 -
Independent	1	Minus	-- 5 --	- 0 -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

JMC
12/14/04

(Column 1) (Column 2) (Column 3)

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	-- 20 --	- 0 -
Independent	1	Minus	-- 3 --	- 0 -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT #	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	-- 20 --	- 0 -
Independent	1	Minus	-- 3 --	- 0 -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 2.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	\$55.00	OR BASIC FEE	\$710.00
X\$9-		OR X\$18-	
X40-		OR X80-	160
+135-		OR +270-	
TOTAL		OR TOTAL	\$710

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$9-		OR X\$18-	0
X40-		OR X80-	0
+135-		OR +270-	0
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	0

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$9-		OR X\$18-	
X40-		OR X80-	
+135-		OR +270-	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	0

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$9-		OR X\$18-	
X40-		OR X80-	
+135-		OR +270-	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	0